OAHU CANDIDATES-SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COM SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT: (a) Candidate Name: (See the Schedule of Reporting Dates to complete this section) Kirk William Caldwell X Prelimina Primary :21 Amended Second (b) Committee Name: Friends of Kirk Caldwell 2nd Preliminary Primary (c) Mailing Address: P O Box 61208 Figal Primary Preliminary General REPORTING PERIOD 96839 Honolulu, HI (d) Phone (Bus) (Res) Final Election Period 11/03/04 through 12/31/04 Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

COLLIBARI A

.......

		COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE	
1.	Cash on Hand at the Beginning of the Election Period.		0.00	\$
2.	Cash on Hand at the Beginning of this Reporting Period	0.00		2
3.	Total Receipts (From Line 15)	1,725.00	1,725.00	3
4.	Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)	1,725.00	1,725.00	4
5.	Total Disbursements (not including Unpaid Expenditures) (From Line 19)	480.77	480.77	5
6.	Cash on Hand at the Closing of this Reporting-Period (Subtract Line 5 from Line 4)	1,244.23	1,244.23	6
7,	Total Loans at the Closing of this Reporting Period	0.00		7
8.	Total Unpaid Expenditures at the Closing of this Reporting Period	0.00		THE STATE OF THE S
9.	Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)	0.00		9
10.	Surplus/Deficit (Subtract Line 9 from Line 6)	1,244.23		10

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate Signature

a candidate is seeking nomination or election to a four-year office.

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form is checked it the candidate is limity a recruimery, river or suppremental neport and has aggregate continuous and aggregate experiences a



	Sompleting This Section)					
RECEIPTS	COLUMN A					
11. Contributions From:	TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE				
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties						
(i) Monetary and Non-Monetary Contributions of \$100 or Less						
(ii) Monetary and Non-Monetary Contributions of More Than \$100	225.00	225.00				
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii))	1,500.00					
(b) Candidate or Candidate's immediate Family	1,725.00	1,725.00				
(i) Monetary and Non-Monetary Contributions of \$100 or Less		11				
(ii) Monetary and Non-Monetary Contributions of More Than \$100		11				
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))		114				
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)		11(1				
13. Public Funds and Other Receipts	1,725.00	1,725.00				
14. Loans		13				
15. Total Receipts (Add Lines 12 through 14).		14				
DISBURSEMENTS	1,725.00	1,725.00				
6. Expenditures						
7. Loans Repaid or Forgiven.	480.77	16				
3. Unpaid Expenditures Paid or Forgiven		480.77				
Subtotal Disbursements (Add Lines 16 through 18).		18				
Unpaid Expenditures	480.77	480.77				
Total Disbursements (Add Lines 19 and 20).		20				
	480.77	480.77				

		CHECK	ONLY	ONE	BOX	ζ	
ISE	SEPARATE	SCHEDULE	E(S) F(OR E	ŀ¢н	CATEGORY	BELO

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION C	R COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON F	OR THE PURPOSE OF SOLICITING CONTRIBUT	IONS OR FOR ANY COMME	RCIAL PURPOSE.
CANDIDATE AN	ID CANDIDATE COMMITTEE NAME:	PAGE	l OF	1
Kirk Will	liam Caldwell; Friends of Kirk Caldv	vell		<u></u>
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	ELECTION PERIOD TOTAL TO DATE
11/04/04	One-Monetary Contribution Cendant Corporation 10 Sylvan Way Parsippany, NJ 07054		200	200
12/03/04	NON-MONETARY CONTRIBUTION Ruth Kobayashi 260 Ainahou Street Honolulu, HI 96825		300	300
12/03/04	NON-MONETARY CONTRIBUTION		250	250
	5496 176th Place SE Bellevue, WA 98006	***************************************		250
12/03/04	NON-MONETARY CONTRIBUTION Thomas Dow 1818 Ontario Place NW Washington DC 20009		250	250
12/30/04	□ NON-MONETARY CONTRIBUTION Anheuser-Busch Cos., Inc. One Busch Place St Louis, MO 63118		500	500
	NON-MONETARY CONTRIBUTION			
1. SUBTOTAL C	F MONETARY AND NON-MONETARY CONTRIBUTIONS TH	. 1500		
2. TOTAL MON	ETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIC Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)	DD (Last Page Only) (Transfer tota		
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With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.